

MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

CANDIDATE COMMITTEE

FOR OFFICIAL USE ONLY

COVER PAGE		/\/\		
Report must be legible, typed or printed in lnk and signed by the treasurer (or designated record keeper) and candidate.	3. This Statement or	11 08 000 to -737		
1. Committee I.D. Number	4. Candidate Last	Name (institution)		
/36638	MOFF ITT 4a. Office Sought Including District # or Community Served (If applicable)			
2. Committee Name	COUNCIL ST. CLAIR SHORES			
CTE MARK MOFFITT	4b. County of Residence ARCONS 6. Treasurer's Name & Residential Address			
5. Committee's Mailing Address	6. Treasurer's Name & Residential Address			
21613 FRAZHO	6. Treasurer's Name & Residential Address PAMELA D. MOFFITT			
ST. CLAIR SHRS, MI 48081	Same as 5.			
Area Code and Phone 586-777-0305	Same as			
If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.	Area Code & Phone			
7. Treasurer's Business Address	8. Designated Recon	ord keeper's Name and Mailing Address (If the committee has a		
_		a keeper)		
Same as 5.		N/A Egg ?;		
		Ging: 0		
	0.4			
Area Code and Phone	Area Code and Ph	ione		
9. TYPE OF STATEMENT				
9a. Pre-Election OR 9b. Post-Election 9c. Annual Statement (2006 Coverage Year)				
	!	9d. Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended)		
Pre-Election or Post-Election Statement relates to:		Control of Control Committee		
General		9e. Dissolution of Candidate Continues		
Primary		Effective Date of Dissolution		
Convention	thool			
Special Ca	ucus	By checking this item. I/We certify that the committee has no assets or outstanding debts, including late filling fees. Further, I/We request that if		
Date of Election, Convention or Caucus		the dissolution cannot be granted, that this be considered a request for		
		Note: The disposition of residual funds must be reported on Schedule 18 and the Summary Page.		
A committee that does not have a Reporting Waiver must file all required Campaign Statements. The Campaign Statements must include all applicable Schedules. Direct contributions, in-kind contributions, loans, expenditures, and outstanding debts count against the \$1,000 Reporting Waiver threshold. Schedules. Direct contributions, in-kind contributions, loans, expenditures, and outstanding debts count against the \$1,000 Reporting Waiver threshold. Schedules information listed in items 2, 4, 5, 6, 7, or 8 has changed since the information was shown on the committee's Statement of Organization, an amendment to the Statement of Organization should accompany this Campaign Statement. If a request for a Reporting Waiver is not received on or amendment to the Statement of Organization should accompany this Campaign Statement cannot be waived.				
before the filling deadline of a required campaign statement, that campaign of this statement and attached schedules (if any) and to the best of				
before the filing deadline of a required campaign statement, and the preparation of this statement and attached schedules (if any) and to the best of 10. Venification: NWe certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of mytour knowledge and belief the contents are true, accurate and complete.				
Current Treasurer or Designated Record keeper Type or Print Name Signature				
MARKI MOFFIT ME 1/2/07				
Candidate Type or Print Name Signature				
1				

Authority granted under P.A. 388 of 1976



MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

SUMMARY PAGE

1. Committee I.D. Number 136638

2. Committee Name CTE Mark Moffitt

CANDIDATE COMMITTEE	Column	Column II
RECEIPTS	This Period	Cumulative this election cycle
3. Contributions	d	1
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	
b. Uniternized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	(18.) \$
c. Subtotal of "Contributions"	(3c.) \$	· · · · · · · · · · · · · · · · · · ·
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$	(20.) \$
IN-KIND CONTRIBUTIONS & EXPENDITURES		(21.) \$
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	- d
7. In-Kind Expenditures (Schedule 1B-IK, Calumn 6)	(7.) \$	(22.) \$
EXPENDITURES		*\$5.00/month bank
8. Expenditures	d	fer assessed lest
a. Itemized (Schedule 1B, Column 6)	(6a.) \$	11/2 - 12/26 = 14mg
 b. Itemized Get-Out-the-Vote (Schedule 1B-G) 	(8b.) \$	1/02
c. Uniternized (less than \$50.01 each - no Schedule)	(8c.) \$	(23.)\$ 70.00
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$	(23.) \$
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$	
b. Uniternized (less than \$50.01 each - no Schedule)	(10b.) \$	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$	(24.) \$
DEBTS AND OBLIGATIONS 12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ BALANCE STATEMENT	
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) 15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period (Add lines 9 and 11) 17. ENDING BALANCE (Subtract line 16 from line 15)	(13.) $\frac{3}{3}$ $\frac{3}{8}$, $\frac{3}{8}$ (14.) + $\frac{5}{8}$ (15.) = $\frac{3}{3}$ $\frac{3}{8}$, $\frac{3}{8}$ (16.) - $\frac{5}{8}$ $\frac{70.00}{20}$ (17.) $\frac{3}{8}$ $\frac{3}{8}$ $\frac{3}{8}$	-